



3634

PTO/SB/21 (09-04)

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TRANSMITTAL FORM <i>(to be used for all correspondence after initial filing)</i>	Application Number	10/520,640	
	Filing Date	January 7, 2005	
	First Named Inventor	Jurg Nyffenegger	
	Art Unit	3634	
	Examiner Name	David M. Purol	
Total Number of Pages in This Submission	12	Attorney Docket Number	0115-045732

ENCLOSURES (check all that apply)		
<input type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance Communication to TC
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input checked="" type="checkbox"/> Amendment / Reply	<input type="checkbox"/> Petition	<input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Terminal Disclaimer	<input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Request for Refund	Amendment Transmittal Ltr (1 p.)
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> CD, Number of CD(s) _____	Return Receipt Postcard/Replacement Drawings (8 p.) Annotated Drawing (1 p.)
	<input type="checkbox"/> Landscape Table on CD	
<input type="checkbox"/> Certified Copy of Priority Document(s)	Remarks	
<input type="checkbox"/> Response to Missing Parts/Incomplete Application		
<input type="checkbox"/> Response to Missing Parts Under 37 CFR 1.52 or 1.53		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT			
Firm Name	The Webb Law Firm		
Signature			
Printed Name	William H. Logsdon		
Date	February 21, 2007	Reg. No.	22,132

CERTIFICATE OF TRANSMISSION / MAILING			
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Signature			
Typed or printed name	Bruce L. White	Date	February 21, 2007

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NO SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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**TRANSMITTAL LETTER**

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Application No.: 10/520,640 Filing Date: January 7, 2005
Examiner: David M. Purol Group Art Unit: 3634
Invention: Tambour Door Comprising A Door Leaf that be Rolled Up and Uses Thereof

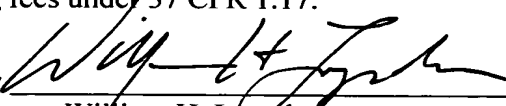
Transmitted herewith is an Amendment in the above-identified application.

- ☐ Small Entity Status is/has been asserted for this application under 37 CFR 1.27.
☐ A verified statement to establish small entity status under 37 CFR 1.27 is enclosed.
☒ No additional fee is required.
☐ The fee has been calculated as shown below:

	No. of Claims After Amendment	Highest No. Previously Paid For	Present Extra	Small Entity Rate	Non-Small Entity Rate	Charge
Total	<u>12</u>	<u>20</u>	<u>0</u>	x \$ 25.00	x \$ 50.00	\$ <u>0</u>
Indep.	<u>2</u>	<u>3</u>	<u>0</u>	x \$100.00	x \$200.00	\$ <u>0</u>
First Presentation of Multiple Dependent Claim/s				+ \$180.00	+ \$360.00	\$ <u>0</u>
				TOTAL ADDITIONAL FEE		\$ <u>0</u>

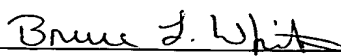
- ☐ A check in the amount of \$ _____ is enclosed to cover the additional fee.
☐ A check in the amount of \$ _____ is enclosed for a _____-month Petition for Extension of time.
☒ The Commissioner is hereby authorized to charge payment of the following fees associated with this communication to Deposit Account No. 23-0650. Please refund any overpayment to Deposit Account No. 23-0650. An original and two copies of this sheet are enclosed.
☒ Any additional filing fees required under 37 CFR 1.16.
☒ Any patent application processing fees under 37 CFR 1.17.

February 21, 2007
Date

By 
William H. Logsdon
Registration No. 22,132
Attorney for Applicants
700 Koppers Building
436 Seventh Avenue
Pittsburgh, PA 15219-1845
Telephone: (412) 471-8815
Facsimile: (412) 471-4094
E-mail: webblaw@webblaw.com

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{W0337598.1}